

TENNESSEE NOTICE OF INTENT TO HOME SCHOOL FORM

To be completed only by parent(s) conducting a home school under the supervision of the superintendent of a local education agency (LEA).

A "home school" is a school conducted by parent(s) or legal guardian(s) for their own children. This form may be utilized as notice of your intent to conduct a home school as permitted by T.C.A. 49-6-3050. **Please complete both copies of the form and return both copies to your local public school superintendent's office by August 1 without a fee. Registration can take place between August 1 and September 1 with a \$20 late fee per week or portion thereof up to a maximum of \$80 per family. If you decide after August 1 to discontinue home schooling or have a change of address, please notify your local public school superintendent as soon as possible. Superintendent may waive September 1 deadline for "good and sufficient" reasons.**

PLEASE PRINT

PART I. STUDENT INFORMATION

A. **GRADES K-8.** For each student in Grades K-8, list the following:

Last Name	First Name	Grade	Subjects to be Taught
1.			
Age	Social Security No. (Optional)		
2.			
Age	Social Security No. (Optional)		
3.			
Age	Social Security No. (Optional)		
4.			
Age	Social Security No. (Optional)		

B. **GRADES 9-12,** For each student in Grades 9-12, list the following:

Last Name	First Name	Grade	Course of Study*	Subjects To Be Taught
1.				
Age	Social Security No. (Optional)			
2.				
Age	Social Security No. (Optional)			

*Designate General or College Preparatory

TENNESSEE NOTICE OF INTENT TO HOME SCHOOL FORM (cont'd)

PART II. PARENT INFORMATION

Provide Information Only For Parent(s) or Guardian Who Will Teach

Last Name

First Name

A. NAME OF PARENT(S) OR GUARDIAN

**LIST ONLY Parent(s) or Guardian
Who Will Teach**

(mother) _____

(father) _____

(guardian) _____

B. HOME (MAILING) ADDRESS

CITY _____ ZIP CODE _____

C. PARENT'S OR GUARDIAN'S EDUCATIONAL BACKGROUND

Complete ONLY for Parent(s) or Guardian Who Will Teach

1. For grades (K - 8), I have a GED or High School Diploma. ☐ Yes ☐ No
2. For grades (9 - 12), I have a Baccalaureate Degree. ☐ Yes ☐ No

PART III. GENERAL INFORMATION

A. PLANNED SCHOOL TERM (4 hours per day required for 180 days per school year.)

Please list the following:

a. No. of Hours per Day _____

- B. HEALTH RECORDS.** Please attach to superintendent's pink copy documentation indicating that student(s) have received immunizations as required by T.C.A. 49-6-5001